

# IHCP *bulletin*

Note: This bulletin has been updated to remove the Healthy Indiana Plan (HIP) from cost-sharing restart.

INDIANA HEALTH COVERAGE PROGRAMS BT202461 MAY 16, 2024

## Medicaid cost sharing restarts July 1, 2024

The Indiana Health Coverage Programs (IHCP) paused Medicaid cost-sharing rules in March 2020 to keep health coverage open for IHCP members during the federal coronavirus disease 2019 (COVID-19) public health emergency (PHE) and the subsequent return-to-normal process. This pause will end July 1, 2024, and the IHCP will restart cost sharing for the Children's Health Insurance Program (CHIP) and Medicaid for Employees with Disabilities (MEDWorks) programs.



**No cost sharing for Healthy Indiana Plan (HIP) members will resume.**

***“Cost sharing,” as discussed in this bulletin, applies only to premiums, contributions and copayments for CHIP (Package C) and MEDWorks. Waiver liability, patient liability and out-of-pocket healthcare expenses for services that are not covered by Medicaid are not included in these provisions.***

### Copayments

CHIP (Package C) members will owe copayments to the provider for certain services and/or prescriptions starting July 1, 2024. Most copayments are under \$10.

As announced in *IHCP Bulletin [BT2023101](#)*, CHIP is the only IHCP program for which copayments will be reinstated; copayments are no longer required under any other IHCP programs. Copayments may be paid at the time of the service or billed to the member for later payment. In accordance with *Code of Federal Regulations 42 CFR 447.52(e) (2)*, a provider may not refuse service due to a member's inability to pay at the time of service, except in the case of pharmacists filling prescriptions.

### Contributions/Premiums

Monthly contribution and premium requirements will also be reinstated, with invoices sent in July for August benefits. Members already receiving benefits in CHIP (Package C) or MEDWorks may need to begin making monthly premium payments. Most **new** applicants for CHIP or MEDWorks will need to make a first payment for their coverage to be activated. Benefits may be reduced or terminated if the contribution or premium is not paid.

CHIP and MEDWorks members will receive their monthly invoices from the premium vendor.

### 5% Out-of-Pocket Maximum

Individual cost-sharing obligations are capped at 5% of family income as calculated on a quarterly basis for MEDWorks, and on an annual basis for CHIP (Package C). After 5% cost sharing is met, the health plan will turn off cost sharing for the remainder of the quarter or year and resume it at the beginning of the next quarter or year.

*Note: For CHIP (Package C), the 5% cost-share limit must be tracked by the individual. If the individual feels they have met the 5% cost-share limit, they must submit verification to the premium vendor.*

Table 1 – Plan updates for IHCP cost-sharing restart, effective July 1, 2024

Health coverage type	Copayment amounts	Monthly premium/contribution amounts (based on household income)
Hoosier Healthwise – Package C (CHIP)	\$3 to \$10 for prescriptions; \$10 for ambulance transportation services	\$22 to \$70 per month
Hoosier Care Connect – MEDWorks	None	\$48 to \$187 per month for individuals \$65 to \$254 per month for married couples

**For more information**

For more information, see IHCP’s [Cost-Share Restart](#) page at [in.gov/medicaid/members](http://in.gov/medicaid/members). This webpage provides information on who must pay cost share, methods to pay cost share, how cost-share amounts are assessed and frequently asked questions (FAQs) including information on the consequences of nonpayment. Free outreach resources, including postcards, flyers and table tents, are also available for stakeholders to use.

**QUESTIONS?**

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